

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90100 030 ***158.75

DOCUMENT # **H27768**

1. Corporation Name

FLORIDA RADIO RENTAL, INC.

Principal Place of Business

Mailing Address

% IVAN A. GOMEZ. ESQ.
601 BRICKELL KEY DR. SUITE 507
MIAMI FL 33131
US

% IVAN A. GOMEZ. ESQ.
601 BRICKELL KEY DR. SUITE 507
MIAMI FL 33131
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/25/1984

2. Principal Place of Business

21 **2700 Davie Road**

2a. Mailing Address

26 **670 Ivan A. Gomez**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 **Davie, FL**

27 Suite 507

28 **Miami, Florida**

24 Zip Country

24 **33314** 25 **USA**

29 Zip Country

29 **33131** 30 **USA**

4. FEI Number

59-2462740

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

PUDSEY, RICHARD L.
2700 DAVIE RD
DAVIE FL 33312

10. Name and Address of New Registered Agent

81 Name
Ivan A. Gomez, P.A.

82 Street Address (P.O. Box Number is Not Acceptable)

601 Brickell Key Drive

83 Suite 507

84 City Zip Code
Miami, FL 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

IVAN A. Gomez, P.A. by [Signature] President. 1/12/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **P**
PUDSEY, RICHARD
STREET ADDRESS **2700 DAVIE RD**
CITY-ST-ZIP **DAVIE FL 33312**

TITLE ☐ DELETE
NAME **V**
PEDERSON, DAVID A.
STREET ADDRESS **2700 DAVIE RD**
CITY-ST-ZIP **DAVIE FL 33312**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP **Davie, FL 33314**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP **Davie, FL 33314**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)